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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptey Court for the | |
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u> </u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 ✓ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Chanelle | |
| | Write the name that is on your government-issued picture identification (for | First name | First name |
| | | | |
| | | Middle name | Middle name |
| | example, your driver's | Hinton | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| | meeting with the trustee. | | |
| , | All other names you | | |
| | have used in the | First name | First name |
| | last 8 years | | |
| | la alcala com assaula de a | Middle name | Middle name |
| | Include your married or maiden names. | | |
| | | Last name | Last name |
| | | | |
| | | First name | First name |
| | | Middle name | Middle name |
| | | wildle hame | Wildle Hame |
| | | Last name | Last name |
| 3. | Only the last 4 | 4220 | |
| | digits of your | XXX - XX- 1339 | XXX - XX- |
| | Social Security number or federal | OR | OR |
| | Individual Taxpayer | 9 xx - xx- | 9 xx - xx- |
| | Identification number (ITIN) | | |

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| De | ebtor 1 Chanelle | Hinton | Case number (if known) |
|---|---|---|--|
| _ | First Name | Middle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | ✓ I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the | | Business name | Business name |
| | last 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | 0077/444 | If Debtor 2 lives at a different address: |
| | | 607 Yates Ave. Number Street | Number Street |
| | | Calumet City Illinois 60409 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | City State Zip Code | 7.0.4 |
| _ | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this | Check one: | Check one: |
| | district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | . , | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 Chanelle First Name | Middle Name | Hinton Last Name | | Case number (if know | /n) | |
|---|--|---|---|---|--|---|
| Part 2: Tell the Court Ab | out Your Bankruptcy | Case | | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | cription of each, see <i>Notice</i> of page 1 and check the app | | | (b) for Individuals | s Filing for Bankruptcy (Form |
| 8. How you will pay the fee | court for more det may pay with cash on your behalf, yo I need to pay the Individuals to Pay I request that my By law, a judge may less than 150% of the fee in installm | ur attorney may pay w fee in installments. I Your Filing Fee in Insta fee be waived (You may, but is not required | ny pay. T money o ith a cre- f you ch illments (nay requ to, waiv e that ap nis option | Typically, if you order If your a dit card or checoose this option (Official Form 10 est this option of e your fee, and oplies to your fan, you must fill or order. | are paying the ttorney is subtended in the ttorney is subtended in the ttorney is subtended in the ttorney if you are may do so out the Application in the Application is subtended in the Application in the Application is subtended in the ttorney is subte | ne fee yourself, you omitting your payment orinted address. tach the <i>Application for</i> e filing for Chapter 7. nly if your income is |
| 9. Have you filed for bankruptcy within the last 8 years? | | hern District of Illinois hern District of Illinois | When When When | 12/23/2015 MM / DD / YYYY 4/18/2014 MM / DD / YYYY | Case number _ Case number _ Case number _ | 15-43165 14-14515 |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | | When When | MM / DD / YYYY MM / DD / YYYY | Relationship to y Case number, if Relationship to y Case number, if | knownyou |
| 11. Do you rent your residence? | ✓ No. Go to | d obtained an eviction judgm line 12. t <i>Initial Statement About an E</i> Inkruptcy petition. | - | | | |

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| Del | btor 1 Chanelle First Name | | Midd | | Hinton Last Name | Case number (if k | nown) | |
|---|--|---------------|--|--|--|--|---|--|
| Par | t 3: Report About An | v Bus | | | | , | | |
| 12. | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | No. | Go to Part 4. Name and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements and location of both statements and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements a | Street Street box to describe you siness (as defined in all Estate (as defined in defined in 11 U.S.C. ker (as defined in 11 | State <i>ur business:</i> n 11 U.S.C. § 101(27A)) ed in 11 U.S.C. § 101(51B) 5. § 101(53A)) | Zip Code | |
| | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | dead opera | llines. If y ations, ca C. § 11 1 No. | ou indicate that you are a ash-flow statement, and a 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code. | a small business de federal income tax r napter 11. eer 11, but I am NOT | nether you are a small bus btor, you must attach your return or if any of these doo a small business debtor | most recent balance cuments do not exist a cuments do not exist according to the defi | e sheet, statement of st, follow the procedure in 11 finition in the |
| Par | t 4: Report if You Ow | n or l | Have A | Any Hazardous Pro | operty or Any I | Property That Need | s Immediate At | ttention |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate | | | | What is the hazard? If immediate attention is r Where is the property? | needed, why is it nee | eded? Street | | |
| | attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | | Zip Code |

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Debtor 1 Chanelle Hinton Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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| Debtor 1 Chanelle | | Hinton Case number (if know | n) | | | |
|---|---|--|---|--|--|--|
| Part 6: Answer These Qu | Middle Name uestions for Reporting Purpo | Last Name SeS | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availa No. Yes. | er 7. Go to line 18. Do you estimate that after any exempt property is able to distribute to unsecured creditors? | s excluded and administrative expenses are | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| Part 7: Sign Below | | | | | | |
| For you | and correct. If I have chosen to file under (11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false st | and I did not pay or agree to pay some ve obtained and read the notice requir with the chapter of title 11, United State tatement, concealing property, or obtaicase can result in fines up to \$250,000 52, 1341, 1519, and 3571. | eed, if eligible, under Chapter 7, vailable under each chapter, and I eone who is not an attorney to help ed by 11 U.S.C. § 342(b). tes Code, specified in this petition. ining money or property by fraud in 0, or imprisonment for up to 20 | | | |

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| Debtor 1 | Chanelle | | Hinton | Case number | (if known) |
|---|-------------------|---|---|---|--|
| | First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not | | eligibility to proceed up the relief available und to the debtor(s) the no certify that I have no ke petition is incorrect. | nder Chapter 7, 11, 13 der each chapter for v tice required by 11 U | 2, or 13 of title 11, U which the person is .S.C. § 342(b) and, i | that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the |
| | o file this page. | /s/ Sean McNulty | | Date | 10/19/2016 |
| | | Signature of Attorney | for Debtor | | MM / DD / YYYY |
| | | Sean McNulty Printed name Semrad Law Firm Firm name 11101 S. Western Ave Street | enue | | |
| | | Chicago | | Illinois | 60643 |
| | | City | | State | Zip Code |
| | | Contact phone | 555555555 | Email address | smcnulty@semradlaw.com |
| | | | | Illine | ois |
| | | Bar number | | Stat | te |

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| Fill in this information to identify your case: | | | | |
|---|------------------------|-------------|----------------------|---|
| Debtor 1 | Chanelle First Name | Middle Name | Hinton Last Name | _ |
| Debtor 2 (Spouse, if filing | | Middle Name | Last Name | _ |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | |
| Case number (If known) | | | (State) | _ |

| Check if this is ar |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|-----------------------|
| | Your assets |
| | Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | 40.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$5,025.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$5,025.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities |
| | Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$7,720.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Ψ1,120.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$26,410.00 |
| Your total liabilities | \$34,130.00 |
| Part 3: Summarize Your Income and Expenses | |
| Cammania Toan moomo ana Exponedo | |
| 4. Schedule I: Your Income (Official Form 106I) | \$1,725.23 |
| Copy your combined monthly income from line 12 of Schedule I | ψ1,120.20 |
| 5. Schedule J: Your Expenses (Official Form 106J) | \$1,550.00 |
| Copy your monthly expenses from line 22, Column A, of Schedule J | φ1,300.00 |
| | |

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| Deb | tor 1 Ch | hanelle | | Hinton | Case n | umber (if known) | | | |
|-------------|--|--|---|--|---------------------|----------------------------|------------|--|--|
| | | rst Name | Middle Name | Last Name | | | | | |
| Part | Part 4: Answer These Questions for Administrative and Statistical Records | | | | | | | | |
| 6. A | re you f | iling for bankruptcy | under Chapters 7, 11, or | 13? | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | |
| [| ── ✓ Yes. | | | | | | | | |
| 7 W | /hat kin | d of debt do you ha | 19 ? | | | | | | |
| /. VI | _ | • | | | | | | | |
| L | _ | | | mer debts are those incurred out lines 8-10 for statistical p | | | | | |
| [| _ | r debts are not prima form to the court with ye | - | ou have nothing to report on th | is part of the form | n. Check this box and subm | it | | |
| | | | r Current Monthly Incom n 122B Line 11; OR, Form | ne: Copy your total current mon 122C-1 Line 14. | onthly income fro | m Official | \$1,613.34 | | |
| 9. | Copy t | the following special | categories of claims fro | om Part 4, line 6 of Schedule | e E/F: | | | | |
| | From I | Part 4 on Schedule E | /F, copy the following: | | | Total claim | | | |
| | 9a. Doi | mestic support obligati | ons (Copy line 6a.) | | | \$0.00 | | | |
| | 9b. Tax | ces and certain other de | bts you owe the governme | ent. (Copy line 6b.) | | \$0.00 | | | |
| | 9c. Cla | ims for death or persor | nal injury while you were in | ntoxicated. (Copy line 6c.) | | \$0.00 | | | |
| | 9d. Stu | ident loans. (Copy line | 6f.) | | | \$9,535.00 | | | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as | | | | | \$0.00 | | | |
| | priority | claims. (Copy line 6g. |) | | | | | | |
| | 9f. Deb | ots to pension or profit- | sharing plans, and other s | similar debts. (Copy line 6h.) | | \$0.00 | | | |
| | 9a. To t | tal. Add lines 9a throug | ah 9f. | | Ī | \$9.535.00 | | | |

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| Fill in this | information to identify your cas | e: | | |
|--|--|--|---|--|
| Debtor 1 | Chanelle | | Hinton | |
| | First Name | Middle N | ame Last Name | |
| Debtor 2 (Spouse, | if filing) First Name | Middle N | ame Last Name | _ |
| United St | ates Bankruptcy Court for the: | Northern | District of Illinois | |
| Case nun | nber | | (State) | |
| Officia | al Form 106A/B | | | Check if this is an amended filing |
| Sche | dule A/B: Prope | erty | | 12/1 |
| category v responsib write your Part 1: | where you think it fits best. B le for supplying correct info name and case number (if kr Describe Each Resider | e as complete and rmation. If more s nown). Answer eve nce, Building, I | I accurate as possible. If two marrie pace is needed, attach a separate s ery question. | n more than one category, list the asset in the ed people are filing together, both are equally sheet to this form. On the top of any additional pages, ou Own or Have an Interest In |
| | No. Go to Part 2 | juitable interest in | any residence, building, land, or si | miliai property: |
| 1.1 | Yes. Where is the property? Street address, if available, or | other description | What is the property? Check all the Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| | Number Street | 7:- Cada | Investment property Timeshare Other | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| | City State | Zip Code | Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Other information you wish to add property identification number: | other |
| If you | own or have more than one, list | here: | property identification number. | |
| 1.2 | Street address, if available, or | other description | What is the property? Check all the Single-family home Duplex or multi-unit building | at apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. |
| | | | Condominium or cooperative Manufactured or mobile home | Current value of the entire property? ——————————————————————————————————— |
| | Number Street City State | Zip Code | Land Investment property Timeshare Other | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| | , | , - | Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | |
| | | | Other information you wish to add | |

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| Debtor 1 | Chanelle | | Hinton | _ Case number | (if known) | |
|-------------------------------------|---|---|---|----------------|--|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3 | et address, if available, or o | | What is the property? Check all that ap Single-family home | pply. | Do not deduct secured cl the amount of any secure Creditors Who Have Cla | • |
| | | | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| Nun City | | Zip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee sit the entireties, or a life of | nple, tenancy by |
| | | | Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | ır | Check if this is cor (see instructions) | nmunity property |
| | | | Other information you wish to add about about the property identification number: | out this item, | such as local | |
| you ha Part 2: Do you ov you own th | Describe Your Vehicler, lease, or have legal or at someone else drives. If yours, trucks, tractors, sport ution | es equitable interest u lease a vehicle, al | in any vehicles, whether they are regists report it on Schedule G: Executory Corespondent | stered or not? | Include any vehicles expired Leases. | |
| 3.1 | Make Model: | Chevy Tahoe | Who has an interest in the proper one. | rty? Check | Do not deduct secured of the amount of any secure | |
| | Year: | 2003 | Debtor 1 only | | | ims Secured by Property. |
| | Approximate mileage: Other information: 2003 Chevy Tahoe | 245000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | | Current value of the entire property? \$2900.00 | Current value of the portion you own? \$2900.00 |
| 3.2 | Make Model: Year: Approximate mileage: | Buick Rendevous 2003 197000 | instructions) Who has an interest in the proper one. Debtor 1 only Debtor 2 only | | Current value of the | d claims on Schedule D: ims Secured by Property. Current value of the |
| | Other information: 2003 Buick Rendevous | | Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this is community proinstructions) | | entire property? \$1000.00 | portion you own? \$1000.00 |

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| tor 1 | Chanelle | Hinton Case number | i (ii kilowii) | |
|-------|--|--|---|---|
| | First Name Middle Name | Last Name | | |
| 3.3 | Make | Who has an interest in the property? Check | Do not deduct secured c the amount of any secure | • |
| | Model: Year: | one. Debtor 1 only | Creditors Who Have Cla | |
| | Approximate mileage: | | Orcanois vino have on | iiris occured by i roper |
| | ··· <u>——</u> | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | ¬ = | entire property: | portion you own: |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured c | |
| | Model: Year: | one. | the amount of any secure Creditors Who Have Cla | |
| | Approximate mileage: | Debtor 1 only | Orcanois vino have on | iiris occured by i Topei |
| | ··· <u>——</u> | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| Exar | | ner recreational vehicles, other vehicles, and accessori oft, fishing vessels, snowmobiles, motorcycle accessori | | |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make | off, fishing vessels, snowmobiles, motorcycle accessori Who has an interest in the property? Check | es Do not deduct secured c | |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: | who has an interest in the property? Check one. | Do not deduct secured conthe amount of any secure | ed claims on Schedule L |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make | who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured conthe amount of any secure Creditors Who Have Cla | ed claims on Schedule I nims Secured by Prope |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule L nims Secured by Prope Current value of the |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured conthe amount of any secure Creditors Who Have Cla | ed claims on Schedule I nims Secured by Prope |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule Laims Secured by Prope Current value of the |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule I nims Secured by Prope Current value of th |
| 4.1 | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Cle Current value of the entire property? Do not deduct secured of | ed claims on Schedule Leatims Secured by Prope Current value of the portion you own? daims or exemptions. Pu |
| 4.1 | Make Model: Other information: Make Model: Make Model: Make Model: Make Model: Make Model: Make Model: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule Is aims Secured by Prope Current value of the portion you own? |
| 4.1 | Make Model: Other information: Make Model: Year: Approximate mileage: Make Model: Year: Other information: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cle Current value of the entire property? Do not deduct secured of | ed claims on Schedule Is aims Secured by Prope Current value of the portion you own? |
| 4.1 | Make Model: Other information: Make Model: Make Model: Make Model: Make Model: Make Model: Make Model: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule II nims Secured by Prope Current value of the portion you own? Laims or exemptions. Pued claims on Schedule II nims Secured by Prope |
| 4.1 | Make Model: Other information: Make Model: Year: Approximate mileage: Make Model: Year: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classifications | ed claims on Schedule It ims Secured by Prope Current value of the portion you own? Laims or exemptions. Pure de claims on Schedule It ims Secured by Prope |
| 4.1 | Make Model: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule It ims Secured by Prope Current value of the portion you own? daims or exemptions. Pure de claims on Schedule It ims Secured by Prope Current value of the |
| 4.1 | Make Model: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule It ims Secured by Prope Current value of the portion you own? daims or exemptions. Pure de claims on Schedule It ims Secured by Prope Current value of the |

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| D | ebtor 1 | Chanelle | | Hinton | Case number (if known) | |
|----------------------------|-----------------------------------|--|---|---|-----------------------------|--|
| Pa | art 3: | First Name Describe Y | Middle Name Your Personal and House | Last Name hold Items | | |
| | | | | e interest in any of the follo | owing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | and furnishings liances, furniture, linens, china, kit | chenware | | |
| ӡ | | escribe | Misc. Household Goods | | | \$350.00 |
| | 7. Elect ı Exampl No | | s and radios; audio, video, stereo, | and digital equipment; computers, pr | inters, scanners; music | |
| ✓ | Yes. D | escribe | Misc. Electronics | | | \$250.00 |
| | Examp No | stamp, co | and figurines; paintings, prints, or | other artwork; books, pictures, or othe ther collections, memorabilia, collectik | • | |
| |). Equip | es: Sports, ph | orts and hobbies otographic, exercise, and other ho | obby equipment; bicycles, pool tables, ents | golf clubs, skis; canoes | |
| $ \underline{\checkmark} $ | No | | | | | |
| L | Yes. D | escribe | | | | |
| | No | | es, shotguns, ammunition, and rel | lated equipment | |] ——— |
| | | | clothes, furs, leather coats, design | ner wear, shoes, accessories | | |
| 닏 | No No | | | | | 7 |
| ⊻ | res. L | escribe | Used Clothing | | | \$350.00 |
| | 2. Jewe Exampl | • | , , , | ent rings, wedding rings, heirloom je | welry, watches, gems, | |
| ✓ | Yes. C | escribe | Used Costume Jewelry | | | \$150.00 |
| | Examp No | -farm animal les: Dogs, cat lescribe | s, birds, horses | | |] |
| 1 | 4 Anv | other nerson | land household items you die | d not already list, including any he | ealth aids you did not list | |
| | No | outer persor | iai ana noasenola items you di | a not an eady not, moluting any ne | aiai aidə you did 110t 115t | |
| | | escribe | | | |] |
| | | | - | art 3, including any entries for pa | _ | \$1100.00 |

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| Deb | tor 1 | Chanelle | | Hinton | Case number (if known) | |
|------|----------|---|---|------------------------------|---|--|
| | | First Name | Middle Name | Last Name | | |
| Part | 4: | Describe Your | Financial Assets | | | |
| Do | you | own or have a | ny legal or equitable int | erest in any of the fo | ollowing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash | | | | | |
| E | Examp | oles: Money you have | e in your wallet, in your home, in a | safe deposit box, and on han | d when you file your petition | |
| | Ш | No | | | | |
| | ✓ | Yes | | | Cash: | \$25.00 |
| 17. | Exa | | vings, or other financial accounts stitutions. If you have multiple acc | | es in credit unions, brokerage houses, n, list each. | |
| | ✓ | Yes | | Institution name: | | |
| | | | | | | |
| | | | 17.1. Checking account: | US Bank | | \$0.00 |
| | | | 17.2. Checking account: | | | |
| | | | 17.3. Savings account: | | | |
| | | | 17.4. Savings account: | | | |
| | | | 17.5. Certificates of deposit: | | | |
| | | | 17.6. Other financial account: | | | |
| | | | 17.7. Other financial account: | | | |
| | | | 17.8. Other financial account: | | | |
| | | | 17.9. Other financial account: | | | |
| 18. | | | or publicly traded stocks | - | | |
| | Exar | mples: Bond funds, i | nvestment accounts with brokerag | e firms, money market accou | ints | |
| | | No | Institution or issuer name: | | | |
| | Ш | Yes | institution of issuer name. | | | |
| | | | | | | |
| | | | | | | - - |
| | | | | | | |
| 19. | | -publicly traded st LC, partnership, a | | ated and unincorporated b | ousinesses, including an interest in | |
| | | No | and joint venture | | | |
| | | Yes. Give specific | Name of entity | | % of ownership: | |
| | | information about | | | | |
| | | them | | | | |
| | | | | | | |
| | | | | | | |

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| Debt | or 1 | Chanelle | | Hinton | Case number (if known) | |
|------|------------|--|--|-------------------------------|---|-------|
| 20. | | | Middle Name orate bonds and other negoti nclude personal checks, cashiers | | | |
| | | No | nts are those you cannot transfer | to someone by signing o | r delivering them. | |
| | Ц | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | | |
| 21. | Exa | | |), thrift savings accounts, | or other pension or profit-sharing plans | |
| | | No | Type of account: | Institution name: | | |
| | Ш | Yes. List each account separately. | 401(k) or similar plan: | | | |
| | | coparatory. | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | You Exa | urity deposits and property share of all unused of mples: Agreements was an area of the state of | orepayments deposits you have made so that you with landlords, prepaid rent, publi | ou may continue service o | r use from a company ater), telecommunications | |
| | | No | | Institution name: | | |
| | Ш | Yes | Electric: | | | , - |
| | | | Gas: | | | |
| | | | Heating oil: | | | , |
| | | | Security deposit on rental unit: | | | . ——— |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | . ——— |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | | uities (A contract for No | a periodic payment of money to | you, either for life or for a | number of years) | |
| | | Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |

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| Debto | or 1 Chanelle First Name | | Middle Name | Hinton Last Name | Case number (if known) | |
|------------|--|--|------------------------------------|---------------------------------------|--|--|
| 24. | Interests in a | n education IRA, in 530(b)(1), 529A(b), ar | an account in a qu | | ler a qualified state tuition program | |
| | ✓ No | 330(b)(1), 329A(b), ai | na 529(b)(1). | | | |
| | Yes | Institution name and | description. Separate | ely file the records of any interest | s.11 U.S.C. § 521(c): | |
| | | | | | | |
| | | | | | | |
| 25. | | able or future intere | ests in property (oth | ner than anything listed in line | e 1), and rights or powers | |
| | ✓ No | , | | | | |
| | Yes. Desc | cribe | | | | |
| 26. | Patents, copy | rights, trademarks | . trade secrets, and | other intellectual property | | |
| | | - | | rom royalties and licensing agree | ments | |
| | ✓ No Yes. Desc | cribe | | | | 7 |
| | | | | | | |
| 27. | | | general intangibles | ntive association holdings, liquor | licences professional licenses | |
| | No No | iding permits, exclusi | ive licerises, coopera | nive association noturings, liquor | ilicerises, professional licerises | |
| | Yes. Desc | cribe | | | | |
| | | | | | | |
| Mon | ev or prope | erty owed to you | u? | | | Current value of the |
| WIOII | , от ртор | | - | | | portion you own? Do not deduct secured |
| | Tax refunds o | | | | | portion you own? |
| | Tax refunds o | wed to you | | | Falsal | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds of ✓ No ☐ Yes. Give sabou | wed to you specific information t them, including whe | ther | | Federal: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| | Tax refunds or No Yes. Give sabou you a | wed to you specific information | ther | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a | wed to you specific information t them, including whe liready filed the return he tax years | ther | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds of No Yes. Give s abou you a and t | wed to you specific information t them, including whee liready filed the return the tax years | ther as | t, child support, maintenance, div | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family support Examples: Past | wed to you specific information t them, including whe liready filed the return he tax years rt due or lump sum alin | ther is nony, spousal suppor | t, child support, maintenance, div | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family support Examples: Past | wed to you specific information t them, including whee liready filed the return the tax years | ther is nony, spousal suppor | t, child support, maintenance, div | State: Local: orce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family support Examples: Past | wed to you specific information t them, including whe liready filed the return he tax years rt due or lump sum alin | ther is nony, spousal suppor | t, child support, maintenance, div | State: Local: orce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family support Examples: Past | wed to you specific information t them, including whe liready filed the return he tax years rt due or lump sum alin | ther is nony, spousal suppor | t, child support, maintenance, div | State: Local: orce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family support Examples: Past | wed to you specific information t them, including whe liready filed the return he tax years rt due or lump sum alin | ther is nony, spousal suppor | t, child support, maintenance, div | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or ✓ No ☐ Yes. Give s abou you a and t Family suppoi Examples: Past ✓ No ☐ Yes. Give s Other amount | wed to you specific information t them, including wheilready filed the return he tax years rt due or lump sum alin specific information | nony, spousal support | | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or ✓ No ☐ Yes. Give s abou you a and t Family suppoi Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp | wed to you specific information t them, including whether including the tax years | nony, spousal support | disability benefits, sick pay, vacati | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or ✓ No ☐ Yes. Give s abou you a and t Family suppoi Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp Soc ✓ No | specific information t them, including whether i | nony, spousal support | disability benefits, sick pay, vacati | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or ✓ No ☐ Yes. Give s abou you a and t Family support Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp Soc | specific information t them, including whether i | nony, spousal support | disability benefits, sick pay, vacati | State: Local: Orce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Chanelle | Hinton | Case number (if known) | |
|------|---|---------------------------------------|--|--|
| | First Name Middle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; hea | lth savings account (HSA); credit, ho | meowner's, or renter's insurance | |
| | ✓ No Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from s If you are the beneficiary of a living trust, expect property because someone has died. No Yes. Describe | | r are currently entitled to receive | |
| 33. | Claims against third parties, whether or not ye Examples: Accidents, employment disputes, insurally No | | demand for payment | |
| 34. | Other contingent and unliquidated claims of to set off claims No Yes. Describe | every nature, including counterc | aims of the debtor and rights | |
| 35. | Any financial assets you did not already list No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries from for Part 4. Write that number here | | | \$25.00 |
| Part | 5: Describe Any Business-Related P | roperty You Own or Have a | n Interest In. List any real estate | in Part 1. |
| | | | | |
| 37. | Do you own or have any legal or equitable into No. Go to Part 6. Yes. Go to line 38. | erest in any business-related prop | C p D | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you already No Yes. Describe | ady earned | | o.cp.cc |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software, No | modems, printers, copiers, fax mach | ines, rugs, telephones, desks, chairs, electro | nic devices |
| | Yes. Describe | | | |

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| Deb | tor 1 Chanelle | Hinton Case number (if k | nown) |
|-----|---------------------------------------|---|---|
| 40. | First Name Machinery fixtures ec | Middle Name Last Name quipment, supplies you use in business, and tools of your trade | |
| 40. | _ | uipment, supplies you use in business, and tools of your trade | |
| | ✓ No Yes. Describe | | |
| | Teo. Describe | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| 42. | Interests in partnersh | ips or joint ventures | |
| | ✓ No | Name of entity: % of | ownership: |
| | Yes. Give specific | Marile of criticy. 76 of | whereinp. |
| | information about them | | |
| | | | |
| | | | |
| 43. | Customer lists, mailing | lists, or other compilations | |
| | ✓ No | | |
| | Yes. Do your lists in | clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | □ No | | |
| | Yes. Desc | ribe | |
| 44 | Any by since related | anamantu vasu did nat alma du liat | |
| 44. | | property you did not already list | |
| | ✓ No | | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | III of your entries from Part 5, including any entries for pages you have attached rhere | ▶ |
| | | | |
| Par | | Farm- and Commercial Fishing-Related Property You Own or Haven interest in farmland, list it in Part 1. | e an interest in. |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related propert | 1? |
| | ✓ No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? Do not deduct secured |
| | _ | | claims |
| 47 | Farms and a state | | or exemptions |
| 47. | Farm animals Examples: Livestock, po | ultry, farm-raised fish | |
| | √ No | • | |
| | Yes. Describe | | |
| | 123. 2000 | | |
| | | | |

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| Debt | or 1 | Chanelle | Middle Norse | Hinton | Case number (if known) | |
|--------------|----------|--------------------------|--|---|--------------------------------|-------------|
| 40 | 0 | First Name | Middle Name | Last Name | | |
| 48. | _ | ps-either growing o | or narvested | | | |
| | M | No | | | | |
| | Ц | Yes. Describe | | | | |
| | _ | | | | | |
| 49. | Far | m and fishing equip | ment, implements, machinery, fixto | ures, and tools of trade | | |
| | V | No | | | | |
| | Ħ | Yes. Describe | | | | |
| | _ | | | | | |
| F0 | - - | m and fishing sumpl | ing shaminals and food | | | |
| 50. | _ | | ies, chemicals, and feed | | | |
| | 뇓 | No | | | | |
| | Ш | Yes. Describe | | | | |
| | - | | | | <u>'</u> | |
| 51. | Any | farm- and commer | cial fishing-related property you did | d not already list | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |
| | | | | | | |
| | | | of your entries from Part 6, includi | | | |
| | ai t 0. | . Write that number i | | | ······ | |
| | | | | | | |
| David | 7. | Deceribe All Dra | marty Val. Own as Have on I | ntaraat in That Vall | Did Not List Above | |
| Part | | | perty You Own or Have an Interpretation of the perty of any kind you did not already | | Did Not List Above | |
| 55. | | | country club membership | y iist: | | |
| | ✓ | No | | | | |
| | П | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | |
| | | | | | | |
| 54. A | dd th | ne dollar value of all | of your entries from Part 7. Write the | nat number here | > | |
| | | | | | | |
| | | | | | | |
| Part | 8: | List the Totals of | f Each Part of this Form | | | |
| | | | | | | |
| 55. F | art 1 | 1: Total real estate, li | ne 2 | | > | |
| 56. r | art 2 | 2 total vehicles, line | 5 | # | | |
| _ | | | | \$3900.00 | _ | |
| | | - | household items, line 15 | \$1100.00 | <u> </u> | |
| 58. P | art 4 | : Total financial asse | ets, line 36 | \$25.00 | _ | |
| 59. F | art 5 | 5: Total business-rel | ated property, line 45 | | | |
| 60. F | art 6 | 6: Total farm- and fis | shing-related property, line 52 | | | |
| 61. F | Part 7 | 7: Total other proper | ty not listed, line 54 | | _ | |
| | | | | | _ | |
| 62. 1 | otal | personal property. | Add lines 56 through 61 | \$5025.00 | | |
| | | | • | *************************************** | Convinersonal property total | + \$5025.00 |
| | | | • | | Copy personal property total ▶ | + \$5025.00 |
| | | | hedule A/B. Add line 55 + line 62 | | | + \$5025.00 |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1 | Chanelle | | Hinton | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing | g) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number (If known) | | | (State) | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | Part 1: Identify the Property You Claim as Exempt | | | | | | | |
|-----|---|---|---|---|--|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: Chevy Tahoe, 2003, 2003 Chevy Tahoe Line from Schedule A/B: 03 | \$2,900.00 | \$2,400.00; \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | | |
| | Brief description: Buick Rendevous, 2003, 2003 Buick Rendevous Line from Schedule A/B: 03 | \$1,000.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covers No Yes | 3 years after that for ca | | | | | | |

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Hinton Debtor 1 Chanelle Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$0.00 **✓** description: \$0 **US Bank** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$350.00 **V** description: \$350.00 Misc. Household Goods 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 Brief 735 ILCS 5/12-1001(a) \$350.00 **V** description: \$350.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$250.00 \checkmark description: \$250.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit 07 Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$150.00 description: \$150.00 **Used Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 Brief 735 ILCS 5/12-1001(b) \$25.00 description: \$25.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit

Schedule A/B:

16

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| | | | · · | | | |
|-------------------------|--|---|--|--|---|--------------------|
| Fill in this in | nformation to identify your case | e: | | | | |
| Debtor 1 | Chanelle | | Hinton | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if | filing) First Name | Middle Name | Last Name | | | |
| United Stat | es Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case numb (If known) | per | | | | | |
| | J Form 106D | | | | | Check if this is a |
| | al Form 106D | | | | | amended filing |
| Sche | dule D: Credit | ors Who Ha | ve Claims Secur | ed by Pro | perty | 12/1 |
| 1. Do an | umber (if known). ny creditors have claims secu | red by your property? his form to the court with yo | e entries, and attach it to this forn ur other schedules. You have nothing | , , | | e your name |
| | | or has more than one secur | ed claim, list the creditor separately | Column A | Column B | Column C |
| | | | , list the other creditors in Part 2. As | Amount of claim | Value of | Unsecured |
| much | n as possible, list the claims in | alphabetical order according | ng to the creditor's name. | Do not deduct the value of collateral. | collateral that supports this claim | portion If any |
| | DIT ACCEPTANCE | Describe the property | that secures the claim: | \$7,720.00 | \$1,000.00 | \$6,720.00 |
| Sour City Who | thrield Michigan 48037 State ZIP Code to owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt of debt was rred | Contingent Unliquidated Disputed Nature of lien. Check a An agreement you n car loan) | nade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset) | | | |
| | Add the dollar value of | vour entries in Column A | on this page. Write that | \$7.720.00 | | |

number here:

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| Filli | in this inform | ation to identify your cas | e: | | | | | |
|--|---|--|---|--|---|---|--|--|
| Deb | otor 1 | Chanelle | | Hinton | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | N.C. I. II. N.I | | | | | |
| (Sp) | ouse, it tiling | First Name | Middle Name | Last Name | | | | |
| Unit | ted States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Can | se number | | | (State) | | | | |
| | nown) | | | | | | | |
| Off | ficial F | orm 106E/F | | | | Cr | neck if this is ar | n amended filing |
| | | | ditoro Who | Have Hase | Soured Claims | | | |
| <u> </u> | neau | ile E/F: Cre | caltors who | nave onse | ecured Claims | | | 12/15 |
| party 106A that entri knov | / to any exe VB) and on are listed in es in the bo vn). | cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach | expired leases that could y Contracts and Unexpire s Who Hold Claims Secu | result in a claim. Also I ed Leases (Official Form red by Property. If more this page. On the top | ns and Part 2 for creditors with ist executory contracts on School 1066). Do not include any crees space is needed, copy the Paof any additional pages, write | nedule A/B editors witl art you nee | 8: Property (Or h partially sec ed, fill it out, n | fficial Form cured claims number the |
| 1. | | | secured claims against ye | | | | | |
| ١. | | o to Part 2. | isecureu ciairiis agairist y | ou: | | | | |
| | Yes. | 0 to 1 ait 2. | | | | | | |
| 2. | listed, iden much as po Continuation | ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more | s. If a claim has both priority | and nonpriority amounts, g to the creditor's name. If particular claim, list the ot | | n priority and | d nonpriority ar | mounts. As |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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| Debto | | linton Case number (if known) | |
|--------|--|---|-----------------|
| | | ast Name | |
| Part 2 | List All of Your NONPRIORITY Unsecured Claim | ns | |
| 3. I | Do any creditors have nonpriority unsecured claims against y | ou? | |
| i | No. You have nothing to report in this part. Submit this form to the | | |
| | ✓ Yes. | to ocalt manyour outer contourios. | |
| | | | |
| | | al order of the creditor who holds each claim. If a creditor has more t | |
| | | n claim listed, identify what type of claim it is. Do not list claims already inc | |
| | • | tors in Part 3.If you have more than four priority unsecured claims fill out t | ne Continuation |
| ı | Page of Part 2. | | |
| | | | Total claim |
| 4.1 | 8154 PAULINA LLC | Last 4 digits of account number | \$5,200.00 |
| | Nonpriority Creditor's Name 8154 Paulina | When was the debt incurred? | |
| | Number Street | When was the dept incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60620 | Unliquidated | |
| | City State Zip Code | _ Disputed | |
| | Who incurred the debt? Check one. | — | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts Others Consider Post Post to Londland | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>Back Rent to Landlord</u> | |
| | ✓ No | | |
| | Yes | | |
| 4.2 | City of Chicago Parking | | \$6,000.00 |
| 7.2 | Nonpriority Creditor's Name | Last 4 digits of account number | ψ0,000.00 |
| | 121 N. LaSalle St # 107A | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60602 | | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | 블 | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts | |
| | No | ✓ Other. Specify Parking Tickets | |
| | = | | |
| | Yes | | |
| 4.3 | Comcast Negative Casadita da Negati | Last 4 digits of account number | \$800.00 |
| | Nonpriority Creditor's Name 11621 E. Marginal Way # 5 | When was the debt incurred? n/a | |
| | Number Street | | |
| | Bankruptcy Dept | As of the date you file, the claim is: Check all that apply. | |
| | Seattle Washington 98168 | Contingent | |
| | Seattle Washington 98168 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | — ' | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts ✓ Other. Specify Cable Bills | |
| | ✓ No | Cable bills | |
| | Yes | | |

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Debtor 1 Chanelle Hinton Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$1,000.00 Last 4 digits of account number _ Nonpriority Creditor's Name 3 Lincokln Cetre When was the debt incurred? Street As of the date you file, the claim is: Check all that apply. c/o Sabrina Copelan Contingent Illinois 60181 Villa Park Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed $\overline{\mathbf{V}}$ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ Electric Bills **✓** No Yes CUSTOM COLL SRVS INC 4.5 \$375.00 Last 4 digits of account number 4706 Nonpriority Creditor's Name 55 EAST 86TH AVE STE D When was the debt incurred? 11/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **MERRILLVILLE** 46411 Indiana Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for |√| **V** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA Yes 4.6 FED LOAN SERV \$3,243.00 Last 4 digits of account number ____ Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 1/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent Harrisburg Pennsylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \checkmark No

Yes

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Debtor 1 Chanelle Hinton Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** FED LOAN SERV 4.7 \$1,869.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 1/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent 17106 Harrisburg Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes 4.8 Illinois Tollway \$900.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Downers Grove 60515 Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? **Tollway Violations** Other. Specify **✓** No Yes Peoples Gas \$800.00 4.9 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Gas Bills Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Chanelle Hinton Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 **PLS Financial** \$900.00 Last 4 digits of account number Nonpriority Creditor's Name 177 W. Lake St When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60601 Chicago Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ Payday Loans **✓** No Yes UNITED AUTO CREDIT CO 4.11 \$9,535.00 Last 4 digits of account number Nonpriority Creditor's Name 1071 Camelback When was the debt incurred? 6/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 92660 Newport Beach California Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **V** No Yes 4.12 WoW Cable Co \$900.00 Last 4 digits of account number _ Nonpriority Creditor's Name 118 East Wing Street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60004 Arlington Heights Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts ✓ Other. Specify _ Cable Bills Is the claim subject to offset? **V** No

Yes

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Chanelle Hinton Debtor 1 Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$14,647.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$16,875.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

\$31,522.00

6j. Total. Add lines 6f through 6i.

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| Fill in this inform | nation to identify your cas | e: | | | |
|---------------------|------------------------------|-------------------------------|---------------------------|---|------------------------------------|
| Debtor 1 | Chanelle | | Hinton | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number | - | | | | |
| (If known) | | | | | 70 |
| Official I | Form 106G | | | L | Check if this is an amended filing |
| Schedul | e G: Execut | ory Contracts | s and Unexp | pired Leases | 12/15 |
| | d, copy the additional p | | | oth are equally responsible for supplying correct in t to this page. On the top of any additional pages, w | |
| 1. Do you h | ave any executory | contracts or unexpir | red leases? | | |
| ✓ No. Che | ck this box and file this fo | rm with the court with your o | ther schedules. You have | ve nothing else to report on this form. | |
| Yes. Fill | in all of the information be | elow even if the contracts or | leases are listed on Sche | chedule A/B: Property (Official Form 106A/B). | |
| | | | | se. Then state what each contract or lease is for (for more examples of executory contracts and unexpired lease | |

State what the contract or lease is for

Person or company with whom you have the contract or lease

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| Fill | in this inforr | nation to identify your cas | se: | | | | |
|----------|--------------------|-----------------------------|---|-----------------------------|-----------------|-----------------------|---|
| Deb | otor 1 | Chanelle | | Hinton | | | |
| | | First Name | Middle Name | Last Name | | | |
| | otor 2 | | | | | | |
| (Sp | ouse, if filin | g) First Name | Middle Name | Last Name | | | |
| Unit | ted States E | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| 0 | | | | (State) | | | |
| | se number nown) | | | | | | |
| • | | | | | | | Check if this is ar |
| | | | | | | | amended filing |
| Of | ficial | Form 106H | | | | | |
| | | | | | | | |
| <u> </u> | neau | le H: Your Co | odeptors | | | | 12/15 |
| 1. | No Yes Within the | ve any codebtors? (If y | ou are filing a joint case, do lived in a community pro ico, Puerto Rico, Texas, Wa | perty state or territory? (| · | perty states and term | itories include Arizona, California, |
| | | | pouse, or legal equivalent liv | ve with you at the time? | | | |
| | | No | passo, or logal oquivalent in | .c you at the time: | | | |
| | | | state or territory did you live? | [,] Fil | in the name and | d current address of | f that person. |
| | | Name of your spouse, f | ormer spouse, or legal equiv | /alent | | | |
| | | Number Street | | | | | |
| | | City | State | Zip Coo | <u> </u> | | |
| | again as a | codebtor only if that p | • | osigner. Make sure you h | ave listed the | creditor on Sched | List the person shown in line 2 ule D (Official Form 106D), |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| Fill in this information to ident Debtor 1 Chanelle | ify your case: | | | | | |
|--|-------------------------------------|--|-----------------|------------------------------|--|--|
| Debtor 1 Chanelle | my your oddor | | | | | |
| | | Hinton | | | | |
| First Name | Middle Name | Last Name | | C | heck if this is: | |
| Debtor 2 Spouse, if filing) First Name | Middle Name | Last Name | | F | An amended filing | |
| 3/1 list Name | Wildule Name | Lastivanie | | | A supplement showing post-petition cha | |
| United States Bankruptcy Court for the | e: Northern | District of Illinois (State) | | L | expenses as of the following date: | |
| Case number | | (State) | | | | |
| If known) | | | | <u> </u> | MM / DD / YYYY | |
| Official Form 106I | | | | | | |
| Schedule I: Your In | icome | | | | | |
| Part 1: Describe Employn | | r (if known). An | swer every | question. | | |
| Fill in your employment information | | Debtor 1 | | | Debtor 2 | |
| information. | Employment status | ✓ Employed | | | Employed | |
| | | Not Employed | | | Not Employed | |
| If you have more than one ioh | | Not Employe | eu | | I I Not ⊑mpioyea | |
| job, attach a separate page witl | O | Not Employe | eu | | Not Employed | |
| job, attach a separate page witl information about additiona | al Occupation | | | | Not Employed | |
| job, attach a separate page witi information about additiona employers. | Employer's name | Not Employe Lexington Healtl | | of LaGrange | Not Employed | |
| job, attach a separate page witi information about additiona employers. Include part time, seasona | Employer's name | Lexington Health | n Care Center o | of LaGrange | | |
| job, attach a separate page witi information about additiona employers. | al Occupation Employer's name | Lexington Healtl | n Care Center o | of LaGrange | Number Street | |
| job, attach a separate page with information about additional employers. Include part time, seasonal or self-employed work. Occupation may include | al Occupation Employer's name | Lexington Health | n Care Center o | of LaGrange | | |
| job, attach a separate page with information about additional employers. Include part time, seasonal or self-employed work. | Employer's name Employer's address | Lexington Health 4735 Willow Spi Number Street | n Care Center o | | | |
| job, attach a separate page with information about additional employers. Include part time, seasonal or self-employed work. Occupation may include student | Employer's name Employer's address | Lexington Health | n Care Center o | of LaGrange 60525 Zip Code | | |

4. Calculate gross income. Add line 2 + line 3.

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| Debtor | 1 Chanelle First Name | Middle Name | Hinton Last Name | Case number | er (if known) | | | |
|-----------------|---|--|---------------------|----------------------------|-----------------------------------|-------|------------------------|--|
| | , | made name | 20011101110 | For Debtor 1 | For Debtor 2 or non-filing spouse | | | |
| Copy | / line 4 here | | → 4. | \$2,253.33 | | | | |
| | all payroll ded | | | | | | | |
| | | and Social Security deductions | 5a. | \$528.10 | | | | |
| | | ntributions for retirement plans | 5b. | \$0.00 | | | | |
| | • | ributions for retirement plans | 5c. | \$0.00 | | | | |
| | - | yments of retirement fund loans | 5d. | \$0.00 | | | | |
| | nsurance | , | 5e. | \$0.00 | | | | |
| | | ort obligations | 5f. | \$0.00 | | | | |
| | Jnion dues | | 5g. | \$0.00 | | | | |
| • | | ons. Specify: | • | | + | | | |
| | | ductions. Add lines 5a + 5b + 5c + 5d + 5e +5i | | \$528.10 | ' | | | |
| +5h. | ine payron det | ductions. Add iines sa + 30 + 30 + 30 + 30 + 36 + 3 | 1 + 5g 0. | ψυ20.10 | | | | |
| | | nthly take-home pay. Subtract line 6 from line | 4. 7. | \$1,725.23 | | | | |
| | | e regularly received: | | | | | | |
| b | ousiness, prof | om rental property and from operating a ession, or farm ent for each property and business showing gro | oss | | | | | |
| | eceipts, ordinar nonthly net inco | y and necessary business expenses, and the to | otal 8a. | \$0.00 | | | | |
| | nterest and di | | oa. 8b. | \$0.00 | | | | |
| 8c. F | | t payments that you, a non-filing spouse, o | | φυ.υυ | | | | |
| lı | nclude alimony, | spousal support, child support, maintenance, nt, and property settlement. | 8c. | \$0.00 | | | | |
| 8d. l | Jnemploymen | t compensation | 8d. | \$0.00 | | | | |
| 8e. S | Social Security | | 8e. | \$0.00 | - | | | |
| In as th | nclude cash ass ssistance that y | ent assistance that you regularly receive istance and the value (if known) of any non-cast ou receive, such as food stamps (benefits unde al Nutrition Assistance Program) or housing | | | | | | |
| | pecify: | | 8f. | \$0.00 | - | | | |
| ŭ | | irement income | 8g. | \$0.00 | | | | |
| | - | income. Specify: | 8h. | + \$0.00 | + | | | |
| 9. Add a | all other incon | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | - 8h. 9. | \$0.00 | | | | |
| | | income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp | 10. oouse | \$1,725.23 | + | = | \$1,725.23 | |
| Inclu relat | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | | | | | | | |
| Spec | cify: | | | | | 11. + | \$0.00 | |
| 12 Add | the amount is | n the last column of line 10 to the amount i | in line 11. The r | acult is the combined mont | thly income | 12 | | |
| | | n the last column of line 10 to the amount in the Summary of Schedules and Statistical Sur | | | | 12. | \$1,725.23 Combined | |
| | | | | | | | monthly income | |
| | you expect an No. | increase or decrease within the year after y | ou file this forn | 1? | | | | |
| ✓ | Yes. Explain: | Debtor will be going back to work shortly after | er being off work | since July 2016. Her incon | ne is estimated. | | | |

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| | Chanelle | | | | | Case number (if known) | | | |
|---------|---------------------|------------------------|------------------|----------|---------------|------------------------|----------|--|--|
| | First Name | Middle Name | Last Name | | | | | | |
| Part 1: | Describe Employment | t | | | | | | | |
| | | Debtor 1 | | | Debtor 2 | | | | |
| Employ | ment status | ✓ Employed | | | Employed | | | | |
| | | Not Employed | | | Not Employed | | | | |
| Occupa | ation | | | | | | | | |
| Employ | ver's name | Lexington Health Care | Center of LaGrar | nge | | | | | |
| Employ | ver's address | 4735 Willow Springs Ro | oad | | | | | | |
| | | Number Street | | | Number Street | | | | |
| | | | | | | | | | |
| | | LaGrange | Illinois | 60525 | | | | | |
| | | | State | Zip Code | City | State | Zip Code | | |
| How lo | ng employed there? | | | | | _ | | | |

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| | Hinton | Case number (if known | n) | | | | | | |
|---|--------------------|--------------------------------------|--|--|--|--|--|--|--|
| Middle Name | Last Name | | | | | | | | |
| Part 2: Give Details About Monthly Income | | | | | | | | | |
| | | For Debtor 1 | For Debtor 2 or non-filing spouse | | | | | | |
| that you regularly receive. | Specify: | | | | | | | | |
| come | | \$0.00 | | | | | | | |
| Income | | \$0.00 | | | | | | | |
| | out Monthly Income | that you regularly receive. Specify: | Middle Name Last Name Dut Monthly Income For Debtor 1 that you regularly receive. Specify: come \$0.00 | Middle Name Last Name Out Monthly Income For Debtor 1 For Debtor 2 or non-filing spouse that you regularly receive. Specify: come \$0.00 | | | | | |

Official Form 106l Schedule I: Your Income page 4

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| Fill in this inform | nation to identify | your case: | | | | | | |
|--|---|---------------------|--|--|-------------|-----------------------------------|----------------------------|------------------------------|
| Debtor 1 | Chanelle | <u> </u> | | Hinton | | | | |
| Debior | First Name | | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | Check | if this is: | | |
| (Spouse, if filing | g) First Name | | Middle Name | Last Name | Ar | n amended filin | g | |
| United States E | Bankruptcy Court | for the: | Northern | District of Illinois (State) | _ | supplement sh penses as of the | | petition chapter 13 date: |
| Case number (If known) | | | | | _ | | | |
| () | | | | | M | M / DD / YYY | ′ | |
| Official | Form 10 | 6J | | | | | | |
| Schedu | le J: You | ır Fyı | nansas | | | | | 12/1 |
| information. If (if known). Ans Part 1: Des | more space is r wer every ques cribe Your H | needed, at tion. | tach another sheet to thi | are filing together, both are equ s form. On the top of any addit | | | | |
| 1. Is this a join | nt case? | | | | | | | |
| ✓ No. Go | to line 2 | | | | | | | |
| Yes. Do | oes Debtor 2 liv | e in a sep | arate household? | | | | | |
| Г | No | | | | | | | |
| | ■ Tyes Debtor 2 | must file (| Official Forms 106.I-2 Expe | enses for Separate Household of I | Debtor 2 | | | |
| 2. Do you hav dependents? | e | ☐ No | 5 | | 2 0.5.6. 2. | | | |
| Do not list D Debtor 2. | | | . Fill out this information for h dependent | Dependent's relationship Debtor 1 or Debtor 2 Child | age | pendent's e ears | Does de with you No. Yes. | pendent live ? |
| | penses include of people other | ✓ No | | | | | | |
| than yourself and | • | Yes | | | | | | |
| dependents Part 2: Esti | | ngoing I | Monthly Expenses | | | | | |
| _ | of a date after th | - | | s you are using this form as a supplemental Schedule J, check | | - | | • |
| | • | | • | ce if you know the value of me (Official Form B 106l.) | | | | Your expenses |
| | or home owner or the ground or lo | | nses for your residence. | Include first mortgage payments a | and | | 4. | \$0.00 |
| If not incl | uded in line 4: | | | | | | | |
| 4a. Real e | state taxes | | | | | | 4a | \$0.00 |
| 4b. Proper | ty, homeowner's, | or renter's | s insurance | | | | 4b. | \$0.00 |
| 4c. Home | maintenance, rep | air, and upl | keep expenses | | | | 4c. | \$0.00 |
| 4d Homeo | owner's association | on or cond | ominium dues | | | | 4.1 | \$0.00 |

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Hinton

Debtor 1

Chanelle Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$275.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$500.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$175.00 10. Personal care products and services 10. \$175.00 11. Medical and dental expenses \$50.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$300.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$75.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | Chanelle | | Hinton | Case number (if known) | | |
|-------------------|--------------------------|--|------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21. Other | . Specify: | | | | 21 | \$0.00 |
| 22. Calc u | ılate your monthly ex | penses. | | | | \$1,550.00 |
| 22a. <i>A</i> | Add lines 4 through 21. | | | | | \$0.00 |
| 22b. 0 | Copy line 22 (monthly ex | xpenses for Debtor 2), if any, fro | m Official Form 106J-2 | | | \$1,550.00 |
| 22c. A | add line 22a and 22b. Tl | he result is your monthly expens | ses. | | 22. | <u> </u> |
| 23.Calcu | late your monthly ne | t income. | | | | |
| 23a. C | Copy line 12 (your comb | nined monthly income) from Sch | edule I. | | 23a | \$1,725.23 |
| 23b. C | Copy your monthly expe | nses from line 22 above. | | | 23b | \$1,550.00 |
| | | penses from your monthly incor | me. | | | \$175.23 |
| · | The result is your montl | hly net income. | | | 23c | |
| 24. Do y o | ou expect an increase | or decrease in your expense | es within the year after you | ı file this form? | | |
| | | to finish paying for your car loar ase or decrease because of a n | | | | |
| 1 | No | | | | | |
| | /es | | | | | |
| | Explain here: | | | | | |
| | · | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|---|--|--|--|
| Debtor 1 | Chanelle | | Hinton | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if fili | ng) First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | _ | | | |
| Case number (If known) | - | | (State) | _ | | | |

Official Form 106Dec

| Check if this is an |
|---------------------|
| amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | | | | | | | |
|-----|---|---|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary ar | nd schedules filed with this declaration and | | | | | | |
| | that they are true and correct. | | | | | | | |
| × | /s/ Chanelle Hinton | x | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 10/19/2016 | Date | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | |

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| | Oh II | | | | Llinton | | | |
|---|---|----------------|-----------------------|---|---|--|-------------------|---|
| tor 1 | Chanelle First Nam | ne | Middle | Name | Hinton Last Name | | | |
| tor 2 | | - | | | | | | |
| use, if fili | ing) First Nam | ne | Middle | Name | Last Name | | | |
| ed States | s Bankruptcy (| Court for the | Northern | Distri | ict of Illinois | | | |
| o Clatoc | Darin aproy | Journal and | 1401410111 | | (State) | | | |
| e number own) | r | | | | | | | |
| OWII) | | | | | | | | Check if this |
| icial | Form | 107 | | | | | | amended filir |
| item | ent of | Financ | ial Affair | s for Indi | viduals Fil | ing for Ba | ankruptcy | / |
| comple | ete and accu | rate as poss | ible. If two marrie | ed people are filin | ng together, both are | equally responsi | ble for supplying | correct information. If m |
| e is need tion. | ded, attach a | separate sh | eet to this form. (| On the top of any | additional pages, w | ite your name and | d case number (if | known). Answer every |
| | | | | | | | | |
| 1: Giv | ve Details | About You | r Marital State | us and Where | You Lived Before | e | | |
| 1471 4 | | | -10 | | | | | |
| wnat | is your curre | ent maritai si | atus? | | | | | |
| M | 1arried | | | | | | | |
| ☑ N | lot married | | | | | | | |
| | | | | | | | | |
| | a the last 3 v | are have ve | u lived anywher | other than wher | e vou live now? | | | |
| | g the last 3 ye | ears, have yo | ou lived anywhere | e other than where | e you live now? | | | |
| During | lo | | · | | • | | | |
| During | lo | | · | | e you live now? de where you live now. | | | |
| During | lo | | · | | • | | | |
| During No | lo | | · | rears. Do not includ | le where you live now. | 2: | | Dates Debtor 2 lived |
| During No | lo es. List all of th | | · | rears. Do not includ | le where you live now. | 2: | | Dates Debtor 2 lived there |
| During No | lo es. List all of th | | · | rears. Do not includ | de where you live now. 1 lived Debtor 2 | | | there |
| During No | lo es. List all of the | ne places you | · | rears. Do not includ | de where you live now. 1 lived Debtor 2 | 2: e as Debtor 1 | | |
| During No Ye | lo es. List all of the ebtor 1: | ne places you | · | rears. Do not includ | de where you live now. 1 lived Debtor 2 | e as Debtor 1 | | there |
| During No Ye | lo es. List all of the | ne places you | · | Dates Debtor there | de where you live now. 1 lived Debtor 2 | e as Debtor 1 | | there Same as Debtor 1 From |
| During No. Ye | lo es. List all of the rebtor 1: 154 S. Paulina lumber Street | ne places you | lived in the last 3 y | Pears. Do not include Dates Debtor there | de where you live now. 1 lived Debtor 2 | e as Debtor 1 | | there Same as Debtor 1 |
| During No. Ye Do 81 No. | lo les. List all of the lebtor 1: 154 S. Paulina lumber Street | ne places you | lived in the last 3 y | Dates Debtor there | le where you live now. 1 lived Debtor 2 Sam Number | e as Debtor 1 Street | 7in Code | there Same as Debtor 1 From |
| During No. Ye Do 81 No. | lo es. List all of the ebtor 1: 154 S. Paulina lumber Street | ne places you | lived in the last 3 y | Dates Debtor there | de where you live now. 1 lived Debtor 2 Sam Number City | e as Debtor 1 Street | Zip Code | there Same as Debtor 1 From To |
| During No. Ye Do 81 No. | lo les. List all of the lebtor 1: 154 S. Paulina lumber Street | ne places you | lived in the last 3 y | Dates Debtor there | de where you live now. 1 lived Debtor 2 Sam Number City | e as Debtor 1 Street | Zip Code | there Same as Debtor 1 From To |
| During No. Ye Policy State B1 No. Cl Ci | lo les. List all of the lebtor 1: 154 S. Paulina lumber Street chicago | Illinois State | lived in the last 3 y | Dates Debtor there From To | le where you live now. 1 lived Debtor 2 Sam Number City Sam | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| During No. Ye Policy State B1 No. Cl Ci | lo les. List all of the lebtor 1: 154 S. Paulina lumber Street | Illinois State | lived in the last 3 y | Pears. Do not includ Dates Debtor there From To From | de where you live now. 1 lived Debtor 2 Sam Number City | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| During No. Ye Policy State B1 No. Cl Ci | lo les. List all of the lebtor 1: 154 S. Paulina lumber Street chicago | Illinois State | lived in the last 3 y | Dates Debtor there From To | le where you live now. 1 lived Debtor 2 Sam Number City Sam | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| During No. Ye Policy Ci Ci No. | lo les. List all of the lebtor 1: 154 S. Paulina lumber Street chicago | Illinois State | lived in the last 3 y | Pears. Do not includ Dates Debtor there From To From | le where you live now. 1 lived Debtor 2 Sam Number City Sam | e as Debtor 1 Street State e as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From |

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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| come Gross income (before deductions and exclusions) |
|--|
| come Gross income pply. (before deductions and |
| pply. (before deductions and |
| pply. (before deductions and |
| pply. (before deductions and |
| |
| ons, tips , a |
| ons, tips , a |
| ons, tips j a |
| Security, unemployment, and other public d lottery winnings. If you are filing a joint |
| |
| Gross income from each source (before deductions and exclusions) |
| |
| |
| |
| i i g |

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| ebtor 1 | | hanelle rst Name | | Middle Name | Hinton Last Name | Case numb | per (if known) | |
|----------|------|---------------------|-----------------|--|--------------------------------|---|--------------------------------|-------------------------------------|
| . mt O - | • | | Daymanta | | | 2 an legement av | | |
| art 3: | LI | st Certain | Payments | s You Made Be | efore You Filed for I | Bankruptcy | | |
| Are | eith | ner Debtor 1's | s or Debtor | 2's debts primari | ily consumer debts? | | | |
| | No. | | | Debtor 2 has prim family, or househol | | consumer debts are defined | in 11 U.S.C. § 101(8) as "incu | rred by an individual |
| | | During the 9 | 00 days befor | e you filed for bank | kruptcy, did you pay any cre | editor a total of \$6,425* or mo | ore? | |
| | | No. Go | to line 7. | | | | | |
| | | to | otal amount y | ou paid that credit | or. Do not include payment | or more in one or more pay is for domestic support oblig an attorney for this bankrup | ations, such as | |
| | | * Subject to | adjustment o | on 4/01/19 and eve | ry 3 years after that for case | es filed on or after the date o | f adjustment. | |
| ✓ | Yes | . Debtor 1 o | r Debtor 2 o | or both have prim | arily consumer debts. | | | |
| | | During the 9 | 00 days befor | e you filed for bank | kruptcy, did you pay any cre | editor a total of \$600 or more | ? | |
| | | ✓ No. Go | to line 7. | | | | | |
| | | th | nat creditor. D | Do not include pay | | more and the total amount y t obligations, such as child s s bankruptcy case. | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | Cre | editor's Name | ; | | | | | Mortgage |
| | Nu | ımber Street | | | | | | Car Credit card Loan repayment |
| | Cit | у | State | Zip Code | | | | Suppliers or vendors Other |
| | Cre | editor's Name | . | | | | | Mortgage Car |
| | Nu | mber Street | | | | | | Credit card Loan repayment |
| | Cit | у | State | Zip Code | | | | Suppliers or vendors Other |
| | Cre | editor's Name |) | | | | | Mortgage |
| | Nu | ımber Street | | | | | | Car Credit card |
| | Cit | ïV | State | Zip Code | | | | Loan repayment Suppliers or vendors |
| | | • | | | | | | Other |

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| Debtor 1 | Chanelle | Chanelle | | Hinton | | | Case number (if known) | | |
|---------------------|---------------------------------------|---|--|-------------------------------------|--------------------------|--|---|--|--|
| | First Name | | Middle Name | La | st Name | | | | |
| Insi corp age | ders include your poorations of which | relatives; an you are an or a busines | y general partners officer, director, pe ss you operate as a | relatives of any rson in control, o | r owner of 20% or mo | tnerships of which y ore of their voting se | tho was an insider? you are a general partner; curities; and any managing omestic support obligations, | | |
| V | No | | ., | | | | | | |
| Ц | Yes. List all paym | ients to an i | nsider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment | | |
| | Insider's Name | | | | | | | | |
| | Number Street | | | | | | | | |
| | City | State | Zip Code | | | | | | |
| | Insider's Name | | | | | | | | |
| | Number Street | | | | | | | | |
| | City | State | Zip Code | | | | | | |
| insi | der? | | for bankruptcy, di | | y payments or trans | fer any property o | on account of a debt that benefited an | | |
| ✓ | No Yes. List all paym | ents that be | nefited an insider. | | | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name | | |
| | | | | | | | moduce orealists marrie | | |
| | Insider's Name | | | | - - <u></u> - | | | | |
| | Number Street | | | | | | | | |
| | City | State | Zip Code | | | | | | |
| | Insider's Name | | | | | | | | |
| | Number Street | | | | | | | | |
| | City | State | Zip Code | | | | | | |

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| ebte | or 1 | | Medalla Nassa | | Hinton Last Name | Ca | se number (if I | known) | |
|------|----------|---|---|-------------------------|---|--|---------------------------------|--------------------------------------|-------------------------------------|
| | | First Name | Middle Name | | | | | | |
| | 4: | Identify Legal | Actions, Reposses | sions, | and Foreclosure | es | | | |
| L | ist a | in 1 year before youll such matters, included | ou filed for bankruptcy, uding personal injury case | were you es, small o | a party in any laws claims actions, divorc | uit, court action es, collection suit | , or administ s, paternity a | rative proceedi ctions, support o | ng? r custody modifications, and |
| | | No | | | | | | | |
| • | Z | Yes. Fill in the detai | ils. | | | | | | |
| | | | | | of the case | Court or a | gency | | Status of the case |
| | | Case title | | Civil | | | ty Circuit Cou | rt | Pending |
| | | - | | | | Court Name | | | On appeal |
| | | Case number | | | | 50 West Wa NumberStre | ashington Stre | eet | ✓ Concluded |
| | | 2016-M1-700438 | | | | Chicago | Illinois | 60602 | _ |
| | | | | | | City | State | Zip Code | |
| | | Case title | | | | | | | Pending |
| | | | | | | Court Name | 9 | - | On appeal |
| | | Case number | | | | | | | |
| | | Case Harriser | | | | NumberStre | eet | | Concluded |
| | | | | | | | | | |
| | | | | | | City | State | Zip Code | |
| | ⊻ | Yes. Fill in the info | rmation below. | | Describe the prop | perty | | Date | Value of the |
| | | | | | | | | | property |
| | | CREDIT ACCEP | TANCE | | 2003 Buick Rendez | vous | | - | <u>\$0</u> |
| | | Creditor's Name | | | | | | | |
| | | PO BOX 513 | | | Explain what hap | pened | | | |
| | | Number Street | | | | | | | |
| | | | | | ✓ Property was r | epossessed. | | | |
| | | | | | Property was f | oreclosed. | | | |
| | | Southfield | Michigan 48037 | | Property was o | garnished. | | | |
| | | City | State Zip Cod | le | Property was a | attached, seized, o | or levied. | | |
| | | | | | Describe the prop | perty | | Date | Value of the property |
| | | | | | | | | | _ |
| | | Creditor's Name | | | | | | | |
| | | | | | Explain what hap | pened | | | |
| | | Number Street | | | | | | | |
| | | . 10111001 011001 | | | Property was r | rangeagead | | | |
| | | | | | Property was f | | | | |
| | | | | | Property was i | | | | |
| | | City | State Zip Cod | le | | attached, seized, o | or levied | | |
| | | Jity | 21p 000 | | I I i opoliy was a | | , ioviou. | | |

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| Debt | or 1 | Chanelle | | Hinton | Case number (if known) | | |
|------|----------|--|--------------------------|-----------------------------|---------------------------------|--------------------------------|---------------------|
| | | First Name | Middle Name | Last Name | | | |
| 11. | | hin 90 days before you fileo ounts or refuse to make a p | | | ank or financial institution, s | et off any amou | nts from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | e creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account n | umber: XXXX- | | |
| | | City State | Zip Code | | | | |
| | | hin 1 year before you filed t ointed receiver, a custodia | | of your property in the p | oossession of an assignee fo | or the benefit of | creditors, a court- |
| | ✓ | No Yes | | | | | |
| Part | 5. | List Certain Gifts and | I Contributions | | | | |
| | | | | | | _ | |
| 13. | Wi | thin 2 years before you file | d for bankruptcy, did yo | ou give any gifts with a to | otal value of more than \$600 | per person? | |
| | ✓ | No | | | | | |
| | Ш | Yes. Fill in the details for ea | _ | December the office | | D-1 | Walion |
| | | Gifts with a total value of per person | more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | - · · · · · · · · · · · · · · · · · · · | | | | | |
| | | Person to Whom You Gave t | the Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person to Whom You Gave | the Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |

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| Deb | tor 1 | Chanelle First Name | Middle Name | Hinton Last Name | Case number (if known |)) | |
|------|----------|---|----------------------------|--|--|-------------------------|-------------------|
| | | Tilotivallie | Wildle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you fil | ed for bankruptcy, did | you give any gifts or contribut | ions with a total value o | f more than \$600 t | o any charity? |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details for e | each gift or contribution. | | | | |
| | | Gifts or contributions t that total more than \$60 | | Describe what you contrib | outed | Date you contributed | Value |
| | | | | | | | |
| | | Charity's Name | | • | | | |
| | | | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| Part | 6: | List Certain Losses | | | | | |
| 10. | | No Yes. Fill in the details. Describe the property y how the loss occurred | | Describe any insurance council locations in the council location in the counci | overage for the loss rance has paid. List | Date of your loss | Value of property |
| | | | | pending insurance claims or A/B: Property. | n line 33 of <i>Schedule</i> | | |
| | | | | | | | |
| Part | _ | List Certain Paymen | | | | | |
| | | ut seeking bankruptcy of de any attorneys, bankrupt No Yes. Fill in the details. | | credit counseling agencies for se Description and value of a | | kruptcy. Date payment | Amount of |
| | | | | transferred | any property | or transfer was made | payment |
| | | LAW FIRM | | Attorney's Fee - 350.00 | | 10/19/2016 | \$350.00 |
| | | Person Who Was Paid | | | | | |
| | | 11101 S. Western Avenue Number Street | | | | | |
| | | | | | | | |
| | | Chianga Illinoi | 0 60640 | | | | |
| | | Chicago Illinoi: City State | | | | | |
| | | | | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Pa | yment, if Not You | | | | |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Pa | vment, if Not You | | | | |

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| Debt | or 1 | Chanelle | | Hinton | Case number (if known |) | |
|------|----------|---|----------------------|-------------------------------------|-----------------------------|--|------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | nin 1 year before you filed for you deal with your credito not include any payment or train No Yes. Fill in the details. | rs or to make paymen | | your behalf pay or transfer | any property to any | one who promised to |
| | ш | res. I ili ili the details. | | | | | |
| | | | | Description and value o transferred | f any property | | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | 014 | 7. 0. 1. | | | | |
| | | City State | Zip Code | | | | |
| | | No Yes. Fill in the details. | | Description and value o | f any Describe ar | ny property or eceived or debts pai | Date id transfer was |
| | | | | property transierred | in exchange | | made |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | nin 10 years before you file ese are often called asset-prot | | you transfer any property to | a self-settled trust or sim | ilar device of which y | you are a beneficiary? |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Description and value | of the property transferre | d | Date transfer was made |
| | | Name of trust | | | | | |

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| Debtor | | Chanelle First Name | Middle | Nama | Hinton Last Name | Cas | e number (if known) | | |
|----------------|--------------------|---|-------------------|----------------------|-----------------------|----------------|--------------------------|--|--|
| Don't O | | | | | | t Bayas an | d Stavaga Unita | | |
| Part 8: | | List Certain Fina | anciai Accoui | nts, instrume | nts, Safe Deposi | t Boxes, an | d Storage Units | | |
| n Ir | nov nclu | ed, or transferred? | , money market, o | or other financial a | | | held in your name, or fo | | |
| | = | No Yes. Fill in the details | | | | | | | |
| L | | res. I iii iii die details | | | st 4 digits of accoun | t Type o | of account or ment | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | US Bank Person Who Was Pa | aid | xx | XX-0000 | | necking | 07/2016 | \$ 400.00 |
| | | 425 Walnut Street | | | | | avings | | |
| | | Number Street | | | | | oney market okerage | | |
| | | Cincinnati C | Ohio 452 | 202 | | Ot | her | | |
| | | | | Code | | | | | |
| | | Person Who Was Pa | nid | XX | XX- | | necking avings | | |
| | | Number Street | | | | | oney market | | |
| | | Trainboi Gudot | | | | | okerage | | |
| | | | | | | | her | | |
| | | City S | State Zip | Code | | | | | |
| | the | e r valuables? No Yes. Fill in the details | | | else had access to i | | eposit box or other dep | · | Do you still have it? |
| | | Name of Financial II | nstitution | Nam | e | | | | ☐ No ☐ Yes |
| | | Number Street | | Num | ber Street | | | | ☐ les |
| | | | | City | State | Zip Code | | | |
| | | City St | tate Zip C | | | | | | |
| 22. H | lave | • | | | er than your home wi | thin 1 year be | fore you filed for bankr | uptcy? | |
| <u> </u> | _ | No | | | | | | | |
| L | _ | Yes. Fill in the details | S. | Who | else had access to i | 1? | Describe the conte | nts | Do you still have it? |
| | | Name of Storage Fa | acility | Nam | e | | | | ☐ No |
| | | Number Street | | Num | ber Street | | | | Yes |
| | | | | | | Zin Carla | | | |
| | | 0:1 | -1- | City | State | Zip Code | | | |
| | | City St | ate Zip C | ode | | | | | |

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| ebtor 1 | | Hinton Case number (if known) | | | | | | | |
|--|---|--|----------------|--|--|--|--|--|--|
| | First Name Middle Name | Last Name | | | | | | | |
| t 9: | Identify Property You Hold or Cor | trol for Someone Else | | | | | | | |
| | | | | | | | | | |
| | you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for meone. | | | | | | | | |
| sor | neone. | | | | | | | | |
| ✓ | No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| - | | Where is the property? Describe the contents | Value | | | | | | |
| | | | | | | | | | |
| | Owner's Name | Number Street | | | | | | | |
| | | _ | | | | | | | |
| | Number Street | | | | | | | | |
| | | | | | | | | | |
| | | City State Zip Code | | | | | | | |
| | City State Zip Code | - | | | | | | | |
| | . | | · | | | | | | |
| irt 10: | Give Details About Environment | il information | | | | | | | |
| or the p | ourpose of Part 10, the following definitions app | ly: | | | | | | | |
| | Environmental law means any fodoral etate or | local statute or regulation concerning pollution, contamination, releases of | | | | | | | |
| | • | rial into the air, land, soil, surface water, groundwater, or other medium, | | | | | | | |
| | | cleanup of these substances, wastes, or material. | | | | | | | |
| | | | | | | | | | |
| | ofte means any location, facility, or property as c or used to own, operate, or utilize it, including c | efined under any environmental law, whether you now own, operate, or utilize it | | | | | | | |
| | | | | | | | | | |
| = / | Hazardous material means anything an environ | | | | | | | | |
| | · | mental law defines as a hazardous waste, hazardous substance, | | | | | | | |
| | oxic substance, hazardous material, pollutant, | | | | | | | | |
| te | oxic substance, hazardous material, pollutant, | contaminant, or similar term. | | | | | | | |
| te | · | contaminant, or similar term. | | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you | contaminant, or similar term. know about, regardless of when they occurred. | al law? | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you as any governmental unit notified you that you | contaminant, or similar term. | al law? | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you be any governmental unit notified you that you | contaminant, or similar term. know about, regardless of when they occurred. | al law? | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you as any governmental unit notified you that you | contaminant, or similar term. know about, regardless of when they occurred. | al law? | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you be any governmental unit notified you that you | contaminant, or similar term. know about, regardless of when they occurred. | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you be any governmental unit notified you that you | contaminant, or similar term. cnow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment | | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you less any governmental unit notified you that you long. No Yes. Fill in the details. | contaminant, or similar term. crow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Environmental law, if you known | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you be any governmental unit notified you that you | contaminant, or similar term. cnow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you less any governmental unit notified you that you long. No Yes. Fill in the details. | contaminant, or similar term. crow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Environmental law, if you known | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you not yes. Fill in the details. Name of site | contaminant, or similar term. cnow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Governmental unit | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you not yes. Fill in the details. Name of site | contaminant, or similar term. cnow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Governmental unit | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you not not seem to see the seem to | contaminant, or similar term. crow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street | ow it Date of | | | | | | |
| to eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you not yes. Fill in the details. Name of site | contaminant, or similar term. crow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street | ow it Date of | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code | Contaminant, or similar term. Environment Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. | ow it Date of | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have some some some some some some some som | Contaminant, or similar term. Environment Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. | ow it Date of | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No | Contaminant, or similar term. Environment Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. | ow it Date of | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have some some some some some some some som | Contaminant, or similar term. Environment Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. | ow it Date of | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No | Contaminant, or similar term. Environment Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. Environmental law, if you known the similar term. Contaminant, or similar term. | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No | contaminant, or similar term. chow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street City State Zip Code Thy release of hazardous material? | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No Yes. Fill in the details. | contaminant, or similar term. crow about, regardless of when they occurred. Cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street City State Zip Code Ty release of hazardous material? Covernmental unit Environmental law, if you known and the potential state of the potential state o | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No | contaminant, or similar term. chow about, regardless of when they occurred. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street City State Zip Code Thy release of hazardous material? | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No Yes. Fill in the details. Name of site | contaminant, or similar term. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street City State Zip Code City State Zip Code Covernmental unit Governmental unit Environmental law, if you known and the state of hazardous material? Governmental unit Environmental law, if you known and the state of hazardous material? Covernmental unit Governmental unit Environmental law, if you known and the state of hazardous material? | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No Yes. Fill in the details. | contaminant, or similar term. crow about, regardless of when they occurred. Cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street City State Zip Code Ty release of hazardous material? Covernmental unit Environmental law, if you known and the potential state of the potential state o | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No Yes. Fill in the details. Name of site | contaminant, or similar term. In ow about, regardless of when they occurred. Governmental unit Governmental unit Number Street City State Zip Code The release of hazardous material? Governmental unit Governmental unit Environmental law, if you known and the properties of t | Date of notice | | | | | | |
| to the port and th | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you is any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code Ye you notified any governmental unit of a No Yes. Fill in the details. Name of site | contaminant, or similar term. cou may be liable or potentially liable under or in violation of an environment Governmental unit Governmental unit Number Street City State Zip Code City State Zip Code Covernmental unit Governmental unit Environmental law, if you known and the state of hazardous material? Governmental unit Environmental law, if you known and the state of hazardous material? Covernmental unit Governmental unit Environmental law, if you known and the state of hazardous material? | Date of notice | | | | | | |

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| Debt | or 1 | Chanelle | | | Hinton | Case | number (if known) | |
|-------|----------|-----------------------|------------------|------------------------|-------------------------------|-----------------------|--|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Have | e you been a party | / in any judic | ial or administra | ative proceeding under | any environmenta | al law? Include settlements and order | S. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the deta | ils. | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the case |
| | | Case title | | | | | | Pending |
| | | | | | Court Name | | | |
| | | Case number | | | Number Street | | | On appeal |
| | | Case number | | | Trainber Greet | | | Concluded |
| | | | | | City State | Zip Code | | |
| Part | 11. | Give Details A | bout Your | Business or | Connections to Ar | ny Business | | |
| i ait | ••• | Olvo Dolano A | bout rour | Buomicoo or | Connections to Ai | iy Duomooo | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | you own a business or | have any of the fo | ollowing connections to any business | ? |
| | | A colo propriot | tor or colf omn | loyed in a trade | profession or other activit | h, oithar full tima a | r part time | |
| | | | | - | profession, or other activit | | r part-time | |
| | | = | | y company (LLC) | or limited liability partner | snip (LLP) | | |
| | | A partner in a | | | | | | |
| | | | _ | ging executive of | | | | |
| | | An owner of at | t least 5% of th | ne voting or equity | y securities of a corporation | on | | |
| | ✓ | No. None of the abo | ove applies. Go | o to Part 12. | | | | |
| | | Yes. Check all that | apply above ar | nd fill in the details | s below for each business | i. | | |
| | | | | | Describe the natu | ure of the busines | Employer Identification n | umber Do not |
| | | | | | | | include Social Security no | umber or ITIN. |
| | | Duringer Name | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | | | | Name of account | ant or bookkeepe | er | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ure of the busines | | |
| | | | | | | | include Social Security no | umber or ITIN. |
| | | Business Name | | | _ | | EIN: | |
| | | 2401100011401110 | | | | | | |
| | | Number Street | | | | | Dates business existed | |
| | | | | | Name of account | ant or bookkeepe | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ure of the busines | Employer Identification n include Social Security no | |
| | | | | | | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | . Idinion Office | | | Name of account | ant or bookkeepe | er | |
| | | City | State | Zip Code | | | From To | |
| | | , | | L - 2-2- | | | | |
| | | | | | | | | |

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| Debto | | | | | Hinton | Case number (if known) |
|--------|---------------|--|---------------|--|------------------------------|---|
| | First N | ame | | Middle Name | Last Name | |
| | creditors No | years before you , or other partion Fill in the details | es. | oankruptcy, did yo | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| ı | 165. | riii ii i iile detaiis | Delow. | | | |
| | | | | | Date issued | |
| | Ne | | | | MM/DD/YYYY | |
| | Nar | ne | | | IVIIVI/DD/1111 | |
| | Nur | nber Street | | | - | |
| | INGI | Tibel Street | | | | |
| | City | , | State | Zip Code | _ | |
| | | | Olaic | Zip Oodc | | |
| Part ' | 12: Sig | n Below | | | | |
| tr | rue and c | orrect. I unders y case can resu | stand that m | aking a false state p to \$250,000, or ir | ement, concealing proper | nts, and I declare under penalty of perjury that the answers are cy, or obtaining money or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | e of Debtor 1 | | | Signature of Debtor 2 |
| | | | | | | Date |
| | | Date 10 |)/19/2016 | | | |
| D | id you at | tach additional | I pages to Y | our Statement of F | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| _ | - | | . • | | | , , |
| Ŀ | ✓ No | | | | | |
| L | Yes | | | | | |
| D | id you pa | y or agree to p | ay someon | who is not an att | orney to help you fill out b | ankruptcy forms? |
| Ī. | N o | | | | | |
| F | | ame of person | | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | | | | | | Declaration, and Signature (Official Form 119). |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Chanelle Hinton | Case No. | |
|----|---|--|---------------------------------------|
| - | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPENSATION | ON OF ATTORNEY FO | R DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), that compensation paid to me within one year before the fil services rendered or to be rendered on behalf of the debtor is as follows: | ing of the petition in bankruptcy, or ag | reed to be paid to me, for |
| | For legal services, I have agreed to accept | | \$4,000.0 |
| | Prior to the filing of this statement I have received | | \$350.00 |
| | Balance Due | | \$3,650.00 |
| 2. | The source of the compensation paid to me was: | | |
| | Debtor Other (spe | cify) | |
| 3. | The source of the compensation paid to me is: | | |
| | Debtor Other (spe | cify) | |
| 4. | I have not agreed to share the above-disclosed compe members and associates of my law firm. | nsation with any other person unless t | hey are |
| | I have agreed to share the above-disclosed compensate members or associates of my law firm. A copy of the atthe people sharing in the compensation, is attached. | | |
| 5. | In return for the above-disclosed fee, I have agreed to rend a. Analysis of the debtor's financial situation, and rend bankruptcy; | - · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
| | b. Preparation and filing of any petition, schedules, sta | atements of affairs and plan which may | y be required; |
| | c. Representation of the debtor at the meeting of credi | tors and confirmation hearing, and any | adjourned hearings thereof; |
| | d. Representation of the debtor in adversary proceedir | ngs and other contested bankruptcy m | atters; |
| 6. | By agreement with the debtor(s), the above-disclosed fee of | loes not include the following services | : |
| | | | |
| | CERTIF | FICATION | |
| | l certify that the foregoing is a complete statement of any agne debtor(s) in this bankruptcy proceedings. | greement or arrangement for payment | to me for representation |
| | 10/19/2016 | /s/ Sean McNulty | |
| | Date | Signature of Attorney | |
| | | Semrad Law Firm | |
| | | Name of law firm | _ |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Hinton, Chanelle | Case No | | | | |
|--------|---|--|--------------------------------------|---------|--|--|
| | Debtor(s) | | 0000110. | | | |
| | | Chapter | Chapter13 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | The above named Debtors hereby verify the | hat the attached list of creditors is true | and correct to the best of their kno | wledge. | | |
| Date: | 10/19/2016 | /s/ Hinton, Chane | le | | | |
| | | Hinton, Chanelle | | | | |
| | | Signature of Debt | or | | | |

UNITED AUTO CREDIT CO c/o Teresa Hasenleder 1071 Camelback Suite 100 Newport Beach , CA 92660

CREDIT ACCEPTANCE PO BOX 513 Southfield , MI 48037

FED LOAN SERV P.O. Box 60610 Harrisburg, PA 17106

FED LOAN SERV P.O. Box 60610 Harrisburg, PA 17106

CUSTOM COLL SRVS INC 55 EAST 86TH AVE STE D MERRILLVILLE, IN 46411

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

Illinois Tollway PO Box 5544 Chicago , IL 60680

Peoples Gas 200 E. Randolph Chicago, IL 60601

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

WoW Cable Co 118 East Wing Street Arlington Heights , IL 60004

8154 PAULINA LLC 8154 Paulina Case 16-33402 Doc 1 Filed 10/19/16 Entered 10/19/16 17:03:45 Desc Main Document Page 58 of 69

Chicago , IL 60620

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PLS Financial 177 W. Lake St. Chicago , IL 60601

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

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- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 10/19/2016 | | | | | | | |
|----------|---------------------|-------|--|--|--|--|--|--|
| Signed: | | | | | | | | |
| /s/ Chan | /s/ Chanelle Hinton | | | | | | | |
|) W | velle | Clark | | | | | | |
| | | V | | | | | | |

Debtor(s)

/s/ Sean McNulty

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Chanelle First Name | Hint Middle Name Last | ton Case | number (if known) | |
|---|--|---|--|---|
| | estions for Reporting Purposes | rvame | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily co "incurred by an individual pr ☐ No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily bu | rimarily for a personal, famusiness debts? Business debts? Business destment or through the op | nily, or household purpose." debts are debts that you incuseration of the business or inv | rred to obtain |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ No. | | ny exempt property is excluded ute to unsecured creditors? | and administrative |
| ^{18.} How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-5 50,001-1 More than | 00,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 n \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million | ,001-\$1 billion 00,001-\$10 billion 000,001-\$50 billion 1 \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million | ,001-\$1 billion)0,001-\$10 billion)00,001-\$50 billion \$50 billion |
| | I have examined this petition, and | I declare under papalty of | porium that the information r | woulded in the const |
| For you | correct. If I have chosen to file under Chap of title 11, United States Code. I us under Chapter 7. If no attorney represents me and I out this document, I have obtained I request relief in accordance with a I understand making a false statem connection with a bankruptcy case | oter 7, I am aware that I may nderstand the relief availal did not pay or agree to pay d and read the notice requi the chapter of title 11, Uni nent, concealing property, | y proceed, if eligible, under C ble under each chapter, and I y someone who is not an atto ired by 11 U.S.C. § 342(b). ited States Code, specified in or obtaining money or prope | hapter 7, 11,12, or 13 choose to proceed erney to help me fill this petition. |
| | both. 18 U.S.C. §§ 152, 1341, 151 /s/ Chanelle Hinton Signature of Debtor 1 | 19, and 3571. | Conchus of Dates C | |
| | Executed on 10/19/2016 MM / DD / Y | | Signature of Debtor 2 Executed onMM / DD / | |

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| | | Docc | iniciti i age oo | 01 09 | |
|---------------------------------|-----------------------------|-----------------------------|------------------------------|--|------------------------------------|
| Fill in this info | ormation to identify your c | ase: | | | |
| Debtor 1 | Chanelle First Name | | Hinton | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | Bankruptcy Court for the: | Middle Name | Last Name | | |
| Case number | | Nottiem | District of Illinois (State) | _ | |
| | Form 106De | PC | | | Check if this is an amended filing |
| Declara | tion About an | _ Individual Debte | or's Schedules | ; | 12/15 |
| Part 1: Sign | n Below | one who is NOT an attorne | | \$250,000, or imprisonment for up to 20 | years, or both. 18 |
| ✓ No | Name of person | | | Petition Preparer's Notice, Declaration, and | |
| /s/ Chan | are true and correct. | e that I have read the sumn | x | with this declaration and of Debtor 2 | |
| Date 10/1 | 19/2016 | | Date | | \$ |

Date

MM/DD/YYYY

MM/DD/YYYY

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| Debtor 1 | 1 Chanelle | | Hinton | Case number (ffknown) |
|----------|---|------------------------------------|--------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. Wi | thin 2 years before yo editors, or other parti | u filed for bankruptcy, did es. | you give a financial statem | ent to anyone about your business? Include all financial institutions |
| V |] No | | | |
| | Yes. Fill in the detail: | s below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | - |
| | Number Street | | | |
| | | | | |
| | City | State Zip Code | | |
| Part 12: | Sign Below | | | |
| a ba | nkruptcy case can res | anelle Hinton | or imprisonment for up to | erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | J | | | Date |
| | Date 10/1 | 9/2016 | | Date |
| Did y | ou attach additional | pages to Your Statement o | of Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)? |
| | No | | | , |
| | Yes | | | |
| Did y | ou pay or agree to pa | y someone who is not an a | attorney to help you fill out | bankruptcy forms? |
| V | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: | Hinton, Chanelle | Case No | | |
|----------------|------------------|--|--------------------------------------|--|
| | Debtor(s) | Case NO. | | |
| | | Chapter. | Chapter13 | |
| | VERIF | ICATION OF CREDITOR MAT | ΓRIX | |
| T knowledge | | rify that the attached list of creditors is to | rue and correct to the best of their | |
| Date: | 10/19/2016 | /s/ Hinton, Char Hinton, Chanelle Signature of Del | | |

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| Debto | r 1 Chanelle | | Hinton | Case number (if known) | | | |
|--------|--|--|--|--|-------------|--|--|
| | First Name | Middle Name | Last Name | > | | | |
| 16. | Calculate the median fa | mily income that applies to | you. Follow these steps: | | | | |
| | 16a. Fill in the state in whi | ich you live. | Illinois | | | | |
| | 16b. Fill in the number of | people in your household. | 2 | | | | |
| | household | nily income for your state and seed in the separate instructions | To find | a list of applicable median income amounts, go online also be available at the bankruptcy clerk's office. | \$63,896.00 | | |
| 17. | How do the lines compa | | • | | | | |
| | 17a. Line 15b is less under 11 U.S.C. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | |
| | U.S.C. § 1325(b) | e than line 16c. On the top of p t)(3). Go to Part 3 and fill out current monthly income from | Calculation of Disposa | s box 2, Disposable income is determined under 11 ble Income (Official Form 122C-2). On line 39 of that | | | |
| Part 3 | Calculate Your Co | mmitment Period Under | 11 U.S.C. §1325(b)(| 4) | | | |
| 18. | Copy your total average | monthly income from line 1 | l. | | \$1,613.34 | | |
| 19. | Deduct the marital adjust commitment period under | stment if it applies. If you are 11 U.S.C. § 1325(b)(4) allows | married, your spouse is you to deduct part of yo | not filing with you, and you contend that calculating the ur spouse's income, copy the amount from line 13. | | | |
| | 19a. If the marital adjustm | ent does not apply, fill in 0 on | line 19a. | | -\$0.00 | | |
| | 19b. Subtract line 19a fr | om line 18. | | | \$1,613.34 | | |
| 20. | Calculate your current n | nonthly income for the year. | Follow these steps: | | L | | |
| | 20a. Copy line 19b. | | | | \$1,613.34 | | |
| | Multiply by 12 (the no | umber of months in a year). | | | x 12 | | |
| | 20b. The result is your cur | rent monthly income for the ye | ear for this part of the form | n. | \$19,360.08 | | |
| | 20c. Copy the median fam | illy income for your state and s | ize of household from lin | e 16c. | \$63,896.00 | | |
| 21. | How do the lines compar | re? | | | | | |
| | | ine 20c. Unless otherwise orde 3 years. Go to Part 4. | ered by the court, on the t | op of page 1 of this form, check box 3, The | | | |
| : | Line 20b is more than 4, The commitment p | or equal to line 20c. Unless ot eriod is 5 years. Go to Part 4. | therwise ordered by the c | ourt, on the top of page 1 of this form, check box | | | |
| art 4 | Sign Below | | | | | | |
| | | | | | | | |
| | By signing here, I decl | are under penalty of perjury tha | at the information on this | statement and in any attachments is true and correct. | | | |
| | 6 | .000000 | | | | | |
| | /s/ Chanelle Hi Signature of Debte | | furt x | and the second Debter 0 | | | |
| | Signature or Debit |) i | \ 5 | gnature of Debtor 2 | | | |
| | Date 10/19/2016 MM/DD/YY | | D | ate MM/DD/YYYY | | | |
| | If you checked 17a, do If you checked 17b, fill above. | o NOT fill out or file Form 1220 I out Form 122C-2 and file it w | C-2. vith this form. On line 39 | of that form, copy your current monthly income from line | e 14 | | |